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## Attorney Docket No. 09879-00034-US UTILITY Michael G. Hoffmann First Inventor PATENT APPLICATION 4-TRIFLUOROMETHYLPYRAZOLYL-TRANSMITTAL Title SUBSTITUTED PYRIDINES AND PYRIMIDINES (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. EU 702905502 US MS Patent Application **APPLICATION ELEMENTS Commissioner for Patents** ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) it an original, and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission 8. See 37 CFR 1.27. (if applicable, all necessary) Specification 43 Computer Readable Form (CRF) Х [Total Pages (preferred arrangement set forth below) b. Specification Sequence Listing on: Descriptive title of the invention Cross Reference to Related Applications CD-ROM or CD-R (2 copies); or Paper Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, Statements verifying identity of above copies C. or a computer program listing appendix Background of the Invention ACCOMPANYING APPLICATIONS PARTS Brief Summary of the Invention Assignment Papers (cover sheet & document(s)) 9. Brief Description of the Drawings (if filed) Detailed Description 37 CFR 3.73(b) Statement 10. Claim(s) Attorney (when there is an assignee) Abstract of the Disclosure Drawing(s) (35 U.S.C. 113) [Total Sheets 11. English Translation Document (if applicable) X Copies of IDS Citations Information Disclosure 12. x Total Sheets 5. Oath or Declaration Statement (IDS)/PTO-1449 Preliminary Amendment Newly executed (original or copy) 13. X Copy from a prior application (37 CFR 1.63(d)) Return Receipt Postcard (MPEP 503) X 14. (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) 15. X **DELETION OF INVENTOR(S)** (if foreign priority is claimed) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). 16. Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: 6. X Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS 23416 X Customer Number or Bar Code Label or Correspondence address below Name Address Zip Code State City Country Telephone Fax 32,707 Name (Print/Type) William E. McShane Registration No. (Attorney/Agent) 1 Tell Date July 24, 2003 Signature



PTO/SB/17 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

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FEE TRANSMITTAL for FY 2003			Application Number				Not Yet Assigned	
			Filing Date				July 24, 2003	
Effective 01/01/2003, Patent fees are subject to annual revision.		First f	Named Inventor			Michael C	3. Hoffmann	
		Examiner Name				Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit			N/A		
TOTAL AMOUNT OF PAYMENT (\$) 750.00		Attom	ву Doo	ket No	). C	09879-00034-US		
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (co	ntinued)	
Check Credit Money Other None								
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Deposit Account	Large Entity Small Entity							
Deposit Account 03-2775	Fee	Fee	Fee	Fee	-	Fee Desc	riotion	
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Deposit Account Connolly Bove Lodge & Hutz LLP	1051	130	2051	65	Surcharge -	late filing fe	e or oath	
Name The Director is hereby authorized to: (check all that apply)	1052	50	2052	25	Surcharge – sheet.	late provision	onal filing fee or cover	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	specification	2	
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application	1812	2,520	1812		_		parte reexamination of SIR prior to	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner ac	tion	·	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting ( Examiner ac		of SIR after	
FEE CALCULATION	1251	110	2251	55	Extension fo	r reply within	n first month	
1. BASIC FILING FEE	1252	410	2252	205			n second month	
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	1253	930	2253	465	Extension fo	r reply within	third month	$\sqcup$
Fee Fee Fee Fee Fee Pescription Fee Paid  Code (\$) Code (\$)	1254	1,450	2254	725	Extension fo	r reply within	fourth month	
1001 750 2001 375 Utility filing fee 750.00	1255	1,970	2255	985	Extension fo	r reply within	fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Ap	•		
1003 520 2003 260 Plant filing fee 1004 750 2004 375 Reissue filing fee	1402 1403	320 280	2402 2403	160	Filing a brief		of an appeal	$\vdash$
1004 750 2004 375 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1403	1,510	1451	140	Request for	-	lic use proceeding	$\vdash$
	1452	110	2452	55	Petition to re	· .		
SUBTOTAL (1) (\$) 750.00	1453	1,300	2453	650	Petition to re			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility issue	fee (or reissi	ue)	
Extra Fee from Claims below Fee Paid	1502	470	2502	235	Design issue	e fee		
Total Claims 13 -20** =   x   =   0.0	1503	630	2503	315	Plant issue f	'ee		$\square$
Independent 1 -3** = x = 0.0	1460	130	1460	130	Petitions to t	the Commiss	sioner	
Multiple Dependent =	1807	50	1807	50	Processing f	iee under 37	CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission	of Informatio	on Disclosure Stmt	
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1201 84 2201 42 Independent claims in excess of 3					(37 CFR 1.1 For each add		ntion to be	ļ
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	examined (3			
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375			examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for of a design a		kaminauon	
and over original patent	Other fee (specify)							
SUBTOTAL (2) (\$) 0.0	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00						
**or number previously paid, if greater; For Reissues, see above								
SUBMITTED BY						Complete (	if applicable)	
Name (Print/Type) William E. McShane	Regist (Attorn	ration No ey/Agent)	32	,707		Telephone	(302) 658-9141	
						July 24, 2003		
WW.								

Express Mail Label No. EU 702905502 US Dated:

Application	No. (	(if	known	١:

Attorney Docket No.: 09879-00034-US

## **Certificate of Express Mailing Under 37 CFR 1.10**

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Utility Patent Application Transmittal Specification, claims, cover page & abstract (English)

First Preliminary Amendment Information Disclosure Statement IDS (Citation) by Applicant Documents referenced in IDS

Claim for Priority and certified copy of Priority Document

Application Data Sheet Return Postcard

Check in the amount of \$750.00